

# Western Council of Engineers (WCE)

All benefits are per pay period unless otherwise noted



<b>Memorandum of Understanding (MOU) Term</b>	July 11, 2023 - June 1, 2026
<b>Representation</b>	Western Council of Engineers (WCE)

## Health and Welfare

<b>Benefit Level</b>	Full Time (80 hours/1.0 FTE)
<b>Medical</b>	<b>Semi-Monthly County Contribution</b> <b>Effective June 1, 2025 - May 31, 2026</b> \$469.00 Employee Only \$938.00 Employee + 1 \$1,326.00 Employee + 2 or More
<b>Dental</b>	\$34.28 Semi-Monthly County Contribution <b>\$25.00 Semi-Monthly Employee Contribution</b>
<b>Vision - County Paid</b>	\$7.45 Semi-Monthly
<b>Basic Life Insurance - County Paid</b>	1x Annual Salary
<b>Supplemental Life Insurance - Employee Paid</b>	1-4x Annual Salary (not to exceed \$500,000 when combined with Basic)
<b>Dependent Life - Employee Paid</b>	\$0.23 Semi-Monthly Coverage of \$5,000 per Eligible Dependent
<b>Accidental Death &amp; Dismemberment (AD&amp;D) - County Paid</b>	1x Annual Salary

## Leave Provisions

<b>Vacation - Accrual based on years of service</b>	Accrue up to 4.94 - 8.01 hours Maximum accrual not to exceed 280 hours
<b>Vacation Savings Plan (VSP) - Employee Paid</b>	Set aside up to 20 hours of base pay each plan year during years 3 through 5
<b>Holiday</b>	12 holidays per year 1 Floating Holiday per year (no carryover or cash out)
<b>Sick</b>	Accrue up to 3.68 hours
<b>Paid Parental Leave</b>	320 hours (subject to eligibility requirements)
<b>Compassionate</b>	Up to 32 hours per eligible occurrence

Retirement - Pension	
<b>Tier 1</b> (Retirement system membership on or before 12/31/2012. Reciprocity provision may apply)	3% at 60
<b>Tier 2</b> (Retirement system membership on or after 1/1/2013)	2% at 62; 2.5% at 67
Retirement - Other	
<b>457 - Voluntary Deferred Compensation</b>	Employee paid (optional)
<b>Retiree Medical Plan -</b> Hired prior to January 1, 2009	See Memorandum of Understanding (MOU) for eligibility requirements
<b>Retiree Health Reimbursement Account (HRA) -</b> Hired on or after January 1, 2009	\$2,400 lump sum deposit upon meeting eligibility criteria; then \$0.58 per eligible pay status hour (Approximately \$1,200 per year)
Other Benefits	
<b>Staff Development and Wellness Reimbursement</b>	\$1,500 per fiscal year
<b>Safety Boots/Shoes</b> Approved classifications only	Voucher worth up to \$170 per paid annually
<b>Dependent Care Assistance Program (DCAP)</b>	Employee paid (optional)
<b>Health Flexible Spending Account (FSA)</b>	Employee paid (optional)
<b>Employee Assistance Program (EAP)</b>	County paid
<b>Long Term Disability</b>	County paid

### Example of Semi-Monthly Medical Premium - Based on 2025/2026 Medical Plan Premiums

Kaiser Permanente HMO with employee only coverage

\$609.87	Total Premium
<u>-\$469.00</u>	County Semi-Monthly Contribution
<b>\$140.87</b>	<b>Employee Semi-Monthly Contribution</b>

**HR Benefits Unit • 707-565-2900 • [hr.benefits@sonomacounty.gov](mailto:hr.benefits@sonomacounty.gov)**

In case of conflict between the information presented in this summary and the current Memorandum of Understanding (MOU), the MOU determines the benefit. This document does not constitute a contract. Benefits are subject to change. For benefits details, please refer to the Salary Resolution or Memorandum of Understanding in effect for this employee group.

Revised: September 25, 2025